

8-14-06

ACC

Application No. (if known): 09/471,971

Attorney Docket No.: 09386/100F051-US1

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One Month Request for Extension of Time Under 37 C.F.R. 1.136(a) (1 page)

Fee Transmittal Sheet (1 pg); Fee Summary Sheet (1 pg)
Request for Continued Examination Transmittal (RCE) (1 page)
Amendment After Final Action Under 37 CFR 1.116 (26 pp)

w/ Exhibit A: Arguments Presented May 10, 2005

regarding claims 5 and 44

w/ Exhibit B: Article: The Long March to Interoperable Digital

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Amendment Transmittal Sheet (1 page)

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Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 09/471,971-Conf. #8165 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMIT December 23, 1999 Filing Date Albhy Galuten First Named Inventor For FY 2005 **Examiner Name** R. M. Pond 3625 Applicant claims small entity status. See 37 CFR 1.27 Art Unit Attorney Docket No. 09386/100F051-US1 TOTAL AMOUNT OF PAYMENT 910.00 (\$) METHOD OF PAYMENT (check all that apply) Other (please identify): Check Credit Card Money Order None Darby & Darby P.C. Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 250 200 100 300 150 500 Utility 50 130 65 Design 200 100 100 200 100 300 150 160 80 Plant Reissue 300 150 500 250 600 300 200 100 0 0 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 Each independent claim over 3 (including Reissues) 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee (\$) Fee Paid (\$) - 89 = HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) Fee (\$) 3____x HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00 1801 Request for continued examination (RCE) (see 37. 790.00 SUBMITTED BY Registration No. 47,522 (212) 527-7791 Telephone August 11, 2006

Date

Louis J. DelJuidig

Name (Print/Type)